



Application Form for Opening Investment Accounts for Clubs, Societies, Associations, NGO's etc

Type of Account (Tick whichever is appropriate)

- Fixed Deposit
- 7 Day Call
- 30 Day Call

A. Organisation's

Registered Name : _____

Registration Number : _____ Country of Registration : _____ Date _____

Business Address : _____

Physical Address : _____

Telephone Number : _____ Fax No: _____

E-mail Address : _____

Income Tax Number : _____ Tax Type: _____

Registered Head Office : _____

Postal Address : _____

Telephone Number : _____ Fax No: _____

E- Mail Address : _____

B. List of Authorised Persons and Their Details

(i) Name : _____

Address : _____

Sex : Male Female (Tick whichever is appropriate)

Maiden Name : _____

Identification : _____ Nationality: _____

Physical Address : _____

Permanent Address: Village: _____ T/A: _____ District: _____

Telephone Number : _____ Fax No: _____

E-mail Address : _____ Cell No: _____

Bank Accounts Held

National Bank of Malawi

Account Name : _____

Account No :

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 Branch: _____

Other Banks

Account Name : _____

Bank : _____ Branch: _____

Account No.

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Spouse's Details

Full Name : _____ Title: _____
Maiden Name : _____
Address : _____
Occupation : _____ Nationality: _____
Telephone Number: _____ Cell No: _____
E-mail Address : _____ Fax No: _____
Bankers : _____

(ii) Name : _____
Address : _____
Sex : Male Female (Tick whichever is appropriate)
Maiden Name : _____
Identification : _____ Nationality: _____
Physical Address : _____
Permanent Address : Village: _____ T/A: _____ District: _____
Telephone Number : _____ Fax No: _____
E-mail Address : _____ Cell No: _____

Bank Accounts Held

National Bank of Malawi

Account Name : _____
Account No :

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 Branch: _____

Other Banks

Account Name : _____
Bank : _____ Branch: _____
Account No

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Spouse's Details

Full Name : _____ Title: _____
Maiden Name : _____
Address : _____
Occupation : _____ Nationality: _____
Telephone Number: _____ Cell No: _____
E-mail Address : _____ Fax No: _____
Bankers : _____

(iii) Name : _____
Address : _____
Sex : Male Female (Tick whichever is appropriate)
Maiden Name : _____
Identification : _____ Nationality: _____
Physical Address : _____
Permanent Address : Village: _____ T/A: _____ District: _____
Telephone Number : _____ Fax No: _____
E-mail Address : _____ Cell No: _____

Bank Accounts Held

National Bank of Malawi

Account Name : _____
Account No :

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 Branch: _____

Other Banks

Account Name : _____
Bank : _____ Branch: _____
Account No

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Spouse's Details

Full Name : _____ Title: _____
Maiden Name : _____
Address : _____
Occupation : _____ Nationality: _____
Telephone Number: _____ Cell No: _____
E-mail Address : _____ Fax No: _____
Bankers : _____

(iv) Name : _____
Address : _____
Sex : Male Female (Tick whichever is appropriate)
Maiden Name : _____
Identification : _____ Nationality: _____
Physical Address : _____
Permanent Address : Village: _____ T/A: _____ District: _____
Telephone Number : _____ Fax No: _____
E-mail Address : _____ Cell No: _____

Bank Accounts Held

National Bank of Malawi

Account Name : _____

Account No :

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 Branch: _____

Other Banks

Account Name : _____

Bank : _____ Branch: _____

Account No

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Spouse's Details

Full Name : _____ Title: _____

Maiden Name : _____

Address : _____

Occupation : _____ Nationality: _____

Telephone Number : _____ Cell No: _____

E-mail Address : _____ Fax No: _____

Bankers : _____

C. Business Information

Type of Business : _____

Source of Capital : _____
: _____

Number of Employees : _____

D. Additional Information if Association is Foreign

Registered name in foreign country: _____

Identification/Registration No : _____

Head Office Address : _____
: _____

Telephone Number : _____ Fax No: _____

E-mail Address : _____

Physical Address : _____

Bankers : _____

Address : _____

E-mail Address : _____ Fax No: _____

E. Associated Individuals

(i). Full Name : _____ Title: _____
Sex : Male Female (Tick whichever is appropriate)
Identity (Passport) : _____ Nationality: _____
Designation : _____ Residential Status: _____
Date of Birth : _____ / _____ / _____ (dd/mm/yyyy)
Telephone Number : _____ cell No. _____ Fax No : _____
E-mail Address : _____
Postal Address : _____

(ii). Full Name : _____ Title _____
Sex : Male Female (Tick whichever is appropriate)
Identity (Passport) : _____ Nationality: _____
Designation : _____ Residential Status: _____

Date of Birth : _____ / _____ / _____ (dd/mm/yyyy)
Telephone Number : _____ Cell No. _____ Fax No : _____
E-mail Address : _____
Postal Address : _____

(iii). Full Name : _____ Title: _____
Sex : Male Female (Tick whichever is appropriate)
Identity (Passport) : _____ Nationality: _____
Designation : _____ Residential Status: _____
Date of Birth : _____ / _____ / _____ (dd/mm/yyyy)
Telephone Number : _____ Cell No. _____ Fax No : _____
E-mail Address : _____
Postal Address : _____

F. Associated Legal Persons

Registered Name : _____
Registration Number : _____
Registered Address : _____
Head Office Address : _____
Physical Address : _____
Telephone Number : _____ Fax No: _____
E-mail Address : _____

G. Referees:

(i). Name : _____
Address : _____
Physical Address : _____
Telephone Number : _____ Cell No. _____ E-mail Address: _____
NBM Acc No

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 Branch: _____

(ii). Name : _____
Address : _____
Physical Address : _____
Telephone Number : _____ Cell No. _____ E-mail Address: _____
NBM Acc No

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 Branch: _____

We, _____ declare that the information we have given is true and we will be liable for any information or part thereof, which is false. We understand that in the event of the discovery that the given information is false, the Bank will be justified to close the account and report the same to relevant authorities without giving notice whatsoever.

Chairman's Name _____ Signature _____ Date ____/____/____

Secretary's Name _____ Signature _____ Date ____/____/____

(Kindly submit your constitution and completed Mandates NBM M4, NBM M7 & Specimen Signature Forms CA 22)

H. For Official Use Only:

Interviewed by : _____ Signature _____

Recommended by : _____ Signature _____

This application has been approved Declined (If declined the Bank is not obliged to give any reason)

Branch Manager _____ Signature: _____ Date: _____

If approved, account to be opened under

Client Number:

Account Number: Branch Code:

Account Name: _____

Last Assessed Date: Credit Rating (P) Mandate No

Date of Establishment: Tax Flag (Insert 1 or 0) Business Type

AU Code (RBM) (P) : Association Size (S/M/L)

ISIC Code (P) : Bank Flag Alpha Code

DATA CAPTURE AUTHORISATION

Prepared By: _____ Input By _____

Verified by: _____ Input Verified By _____

Authorised By: _____

APPENDICE 12



National Bank of Malawi
Registered under the Banking Act 1989

No.

Appointment of Bankers (Clubs, Associations, Societies, NGO's etc.)

A/C Name _____

A/C Number [grid of 12 boxes]

To: The Manager
National Bank of Malawi
_____ Branch

(N.B. This form should not be used for companies. Building Societies or Industrial and Provident Societies)

1. Inset "Committee" or as the case may be.

At a meeting of the (1)
.....

2. Inset name of the Society Club or association, NGO

..... of the (2)
.....
held at on
the Day of

It was resolved:

That National Bank of Malawi be appointed the Bankers of the
.....

3. Inset "Society", "Club", "Association" or as the case may be

[hereinafter referred to as] _____
(3)

That regarding theAccount(s) the said Bank are hereby authorized and requested:

1. To honour and comply with all cheques, drafts, bills of exchange, Promissory notes, acceptances negotiable instruments and orders expressed to be drawn, accepted, made or given on behalf of the (3).....and to debit such cheques, drafts, bills, notes, acceptances, instruments and orders to the banking account or accounts of the said (3)..... Whether the banking account or accounts are overdrawn or any overdraft is increased by any payment thereof or in relation thereto or

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are in credit or otherwise without prejudice to the Bank's right to refuse to allow any overdraft or increase of overdraft.

1. Inset "Committee" or as the case may be.

2. Insert name of the Society Club or association, NGO

2. To honour and comply with all instruction to deliver or dispose of any securities or documents or property held by the Bank on behalf of (3).....

.....
.....

To hold the (3)

3. Insert "Society", "Club", "Association" or as the case may be

liable on all agreements and indemnities in connection with the issue of letters of credit, drafts and telegraphic transfers/swift and with all banking transactions.

As per signing arrangement
*Office held to be (specified)

Provided any such cheques, drafts, bills of exchange, promissory notes, acceptances, negotiable instruments, orders, instructions, agreements and indemnities are signed by the persons holding the under mentioned offices for the time being*.....

.....
.....
.....

3. To treat all cheques, drafts, bills of exchange, promissory notes, acceptances, negotiable instruments and orders as being endorsed on behalf of the (3) and to discount or otherwise deal with them provided such endorsements purport to be signed by*.....

4. To cancel all existing mandates (if any) in force at the date hereof with disregard to the said account(s) which mandates are hereby terminated. Provided that all authorities, instructions, instruments and transactions authenticated in accordance with any existing mandate and purporting to have been given, made, issued or entered into prior to receipt by National Bank of Malawi of notice of this resolution shall have effect as between* (2)

.....
.....
.....

and National Bank of Malawi as though this resolution had never been passed.

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That in the event of the said account(s) becoming overdrawn at any time the said bank shall be entitle to changed compound interest on the sum

1. **Inset “Committee” or as the case may be.**
2. **Insert name of the Society Club or association, NGO**
3. **Insert “Society”, “Club”, “Association” or as the case may be**

by which the said account(s) is overdrawn calculated on daily balances with monthly rests and that the rate of interest charged from time to time shall be at your sole discretion up to but not exceeding the current marginal ruling rate. The said Bank shall not be bound to notify.....(3)
 in advance of any change in the rate of interest but on receipt of a written request from(3)
 Shall be obliged to specify the rate of interest being charged at the time of such request.

That a list of the names and specimen signatures of the persons at present authorized to sign under this resolution be furnished to he said Bank at the said branch and that they be advised by letter signed by the any two authorized signatories for the time being of all changes that may take place in the same from time to time and thereby be authorizes to act thereon.

That a copy of this resolution be furnished to said Bank at the said branch; and that it remains in force until the receipt by the said Bank at the said branch of a duly certified copy of a resolution rescinding the same. We hereby certify the above to be a true copy from Minutes and we hand you herewith:

- a) Copy of our constitution.
- b) A full list of the present signatories with their respective signatures (the position of each signatory, e.g. Chairman, Secretary, Treasurer should be stated after each name)

TWO SPECIMEN SIGNATURES OF EACH AUTHORIZED OFFICERS AS SHOWN BELOW ARE ENCLOSED

Title	Full name
Chairman	
Secretary	
Treasurer	

Chairman’s Signature

Secretary’s Signature

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Date